



Barry Gibes <barry.gibes@gmail.com> on 02/21/2016 09:05:12 PM

To: 2022190174@FEC.gov,
cc:

Subject: Form 5 Year End Report

Hello,

Please see the attached pdf containing the year end report for Independent Expenditures. I apologize for being late. FED ID NUMBER C00583385.

Sincerely,

Ben Pinder



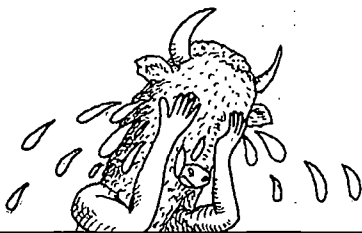
The Mythic History of America, For America Super PACfec_form5_YE2015.pdf

20160221090512PM

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation <i>Ben Pinder for The Mythic History of America for America Super PAC</i>		
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported <i>6383 Mill St PO Box 525</i>		
(c) City, State and ZIP Code <i>Rhinebeck, NY 12572</i>		3. FEC Identification Number C00583385
2. Occupation and Name of Employer (for Individual Filers Only) <i>Artist / High Priest</i>		

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☒ January 31 Year-End Report

☐ 24-Hour Report

☐ 48-Hour Report

b) Is this Report an amendment? ☒ No ☐ Yes, it amends the report filed on

5. COVERING PERIOD:

FROM

08/15/2015

THROUGH

12/31/2016

6. TOTAL CONTRIBUTIONS

44430

7. TOTAL INDEPENDENT EXPENDITURES

36737

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Ben Pinder

Ben Pinder

2/21/16

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 52 U.S.C. §30109.

For further information, contact: Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 OF 2
 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Ben Pinder

Full Name (Last, First, Middle Initial) of Payee Pinder, Ben		Date of Public Distribution/Dissemination 01 / 29 / 2016	
Mailing Address 1471 Centre Rd		Amount 5000	
City Rhinebeck	State NY	Zip Code 12572	
Purpose of Expenditure Website hosting of CityStateofAmerica.info	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures..... 5000

(b) SUBTOTAL of Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures..... 36737
 (carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE **2** OF **2**
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Ben Pinder

Full Name (Last, First, Middle Initial) of Payee

Pinder, Ben

Date of Public Distribution/Dissemination

12 / 18 / 2015

Mailing Address

1471 Centre Rd

Amount

4966

City

Rhinebeck

State

NY

Zip Code

12572

Purpose of Expenditure

Postcard purchase 250 ct

Category/
Type

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☐ President

Check One:

☐ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For:

☐ Primary

☐ General

☒ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Pinder, Ben

Date of Public Distribution/Dissemination

12 / 28 / 2015

Mailing Address

1471 Centre Rd

Amount

5030

City

Rhinebeck

State

NY

Zip Code

12572

Purpose of Expenditure

Postage for Postcards

Category/
Type

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☐ President

Check One:

☐ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For:

☐ Primary

☐ General

☒ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Pinder, Ben

Date of Public Distribution/Dissemination

10 / 25 / 2016

Mailing Address

1471 Centre Rd

Amount

21241

City

Rhinebeck

State

NY

Zip Code

12572

Purpose of Expenditure

Pamphlets 5000 ct

Category/
Type

Office Sought:

☐ House

State: _____

☐ Senate

District: _____

☐ President

Check One:

☐ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For:

☐ Primary

☐ General

☒ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....

31237

(b) SUBTOTAL of Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures.....

(carry total from last page forward to Line 7)

31237

2016-02-22 09:00:14:280

SCHEDULE 5-A
ITEMIZED RECEIPTS

PAGE 1 OF 1

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF FILER (In Full)

Ben Pinder

A. Full Name (Last, First, Middle Initial)

Pinder, Ben

Mailing Address

1471 Centre Rd #

City

Rhinebeck

State

NY

Zip Code

12572

Date of Receipt

08 / 03 / 2015

Amount of Each Receipt this Period

10000

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

B. Full Name (Last, First, Middle Initial)

Pinder, Ben

Mailing Address

1471 Centre Rd

City

Rhinebeck

State

NY

Zip Code

12572

Date of Receipt

11 / 09 / 2015

Amount of Each Receipt this Period

34430

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

C. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

D. Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

SUBTOTAL of Receipts This Page (optional)

44430

TOTAL This Period (last page carry total to Line 6)

44430

Via E-Mail

2016-02-22-07:000514230

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify): E-MAIL	Date of Receipt or Postmarked 2/21/16
PREPARER [Signature]	2/22/16 DATE PREPARED

(3/2015)